



STEVE WESTLY
California State Controller

DECLARATION CONCERNING RESIDENCE

Name of Decedent

Date of Death

Social Security Number

The undersigned, under penalty of perjury, makes the following statements for the purpose of establishing the place of decedent's residence at the date of death:

1. What was the decedent's *legal* residence at the date of death? (City and state or country)

a. Decedent's street address: _____

b. Type of abode maintained at that address (home, apartment, hotel room, etc.)

c. Did the decedent maintain these quarters while in California? () Yes () No

2. What was the decedent's *physical* residence at the date of death? (City and state or country)

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3. Did the decedent own a home? () Yes () No If yes, give city and state.

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4. When and where was the decedent last employed or actively engaged in business?

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5. When and where did the decedent last vote? _____

6. For what year did the decedent last file a federal income tax return? _____

7. Where and in what state did the decedent last file a state income tax return?

8. Did the decedent own an automobile? () Yes () No If yes, in what state was it registered?

9. Did the decedent belong to a church, lodge, or other social fraternal or religious club or organization in California? () Yes () No. If yes, give name and addresses of such clubs or organizations.

10. Did the decedent spend any time in California in the five years immediately prior to his/her death?
() Yes () No. If yes, give the approximate dates, addresses, and purpose for being in California.

11. Use the following space to give any additional information in your possession bearing upon the questions of the decedent's residence at the date of death.

I declare, under penalty of perjury, that all the foregoing is true and correct.

Name (print or type):

Address:

Signature:

Date:

Relationship to decedent:
